

Alameda County Sheriff's Office

Gregory J. Ahern, Sheriff / Coroner Coroner's Bureau, 2901 Peralta Oaks Ct, Oakland, CA 94605 (510) 382-3000 / (510) 382-3033 (fax)

Coroner Investigator's Report

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<u></u>	JACKSON, Marquis Nathaniel										2015-02967			
CALL INFO	REPORTED BY			REPORTED BY PHONE NO.			REPORTING AGENCY				REFERENCE NUMBER			
	Forrest Mealey DO			(510) 204-4444			Alta Bates Medical Center-Ashby Campu				15-17147			
	INVESTIGATOR			CALL DATE AND TIME			CASE TYPE							
		ca Lore		10/2/2015 1	0:21		moval C	ase				_		
	DATE AND TIME OF DEATH			DATE OF BIRTH	AGE	AGE GENDER RACE				MARITAL	STATUS	VET?		
	10/2/2015 10:15			4/27/1982	33 Years	33 Years Transge Af			an-American Never Married					
	HGT WGT EYE COLOR		HAIR COLOR	OCCUPATION	OCCUPATION			EMPLOYER						
F	279	74	Brown	Black	Cashier									
DECEDENT	Preliminary Summary													
	LOCATION Alta Ba		lical Center-As	shby Campus							TYPE spital - IP			
ЭЕАТН	ADDRESS (STREET, CITY, STATE, ZIP)								Υ					
	2450 As	shby Av	enue Berkeley											
	Manner	Natu	ıral		Death Certificate Signed By: J. Hovda, Dep					oroner	Li .			
	Cause A	COM	IPLICATIONS	OF CHRONIC SEIZURE DISORDER						Interval Years				
Ä	Cause B			<u> </u>						Interval				
	Cause C								Interval					
	Cause D									Interval				
	Other Significant Conditions			5 t ₁										
N O	LEGAL NEX	T OF KIN			RELATIO	NSHIP			TELEPHO	NENO.				
NOTIFICATION	1:								- 7					
5	NOTIFIED BY					METHOD In Dayson			DATE AND					
E .				-		In Person			10/2/20)151	0:15			
ž	Personal				10/2/2									
-	LOCATION OF INCIDENT										AT WORK	=		
INCIDENT	ADDRESS (STREET, CITY, STATE, ZIP)						COU	INTY		DATE A	ND TIME OF INCID	DENT		
Z	INVESTIGAT	TING AGEN	ICY					OFFICER						
	FUNEDAL HOME									M. Bitle				
۵.	FUNERAL HOME BODY RELEASED T aDirectCremation.com 10/7/2015								13:56					
DISP	Full Autopsy Partial Autopsy Inspection Record Review Inspection w/Speci													
П	- V	- artial At		Record Review Inspection waspecimen			Michael Ferenc							
	Michae													



Investigator Narrative

Decedent:

JACKSON, Marquis Nathaniel

Case Number:

2015-02967

Investigator:

Rebecca Lorenzana

First Call Information:

On Friday, October 2, 2015, about 1021 hours, Dr. Forrest Mealey from Alta Bates Medical Center-Ashby campus called and reported the apparent natural death of an in-custody, 33 year old transgender female, Marques Jackson (later identified as Marquis Jackson). On 09/30/15, the decedent was found unresponsive in her cell at Santa Rita Jail (SRJ) and transferred to Valley Care Medical Center. Her condition worsened and she was then transferred to Alta Bates Medical Center-Ashby Campus for neurological care where she was pronounced deceased on, October 2, 2015, at 1015 hours. There was no reported trauma or foul play. Jackson's medical history consisted of Her next of kin, death was pronounced. (RL1702)

Medical Summary:

While in the hospital, Jackson was diagnosed with A CT scan was found to show (RL1702)

Description of the Death/Injury Scene:

Jackson was found unresponsive in her jail cell at Santa Rita Jail in Housing Unit 8. She was transported, via ambulance, to Valley Care Medical Center in Pleasanton and then later transferred to Alta Bates Medical Center-Ashby for a higher level of care. Jackson was placed on a ventilator and died at Alta Bates Medical Center-Ashby Campus with her family at her bedside. (RL1702)

Body Identification:

Jackson was personally identified to me by her mother, transgender and known to them by the name of "Leiloni." (RL1702)

I compared Jackson to the booking photograph on file for her on the Consolidated Records Information Management System (CRIMS) and was able to make a positive identification. Person file number was associated to Jackson. (RL1702)



On Tuesday, October 06, 2015, about 1210 hours, a Fingerprint Comparison letter was faxed to the Coroner's Bureau from CIB and it gave a positive identification to her PFN. The fingerprint comparison made of Jackson, Marques DOB: 04/27/1982 to the fingerprints associated with PFN (Person File Number): were identified to have been made by the same subject. (CEF1691)

Next of Kin Investigation:

Jackson was never married and had no children. Jackson's legal next of kin was her mother was present at the hospital at the time of death. (RL1702)

Other Agency Reports:

This death occurred within the jurisdiction of the Alameda County Sheriff's Office. Lieutenant G. Verbeck wrote the incident report for this case, #15-017257. In summary, the report stated Jackson was reported deceased to the Coroner's Bureau. The report was added to the case file.

On September 30, 2015, a memorandum describing the incident was written by Lieutenant J. McGrail. In summary, the timeline from which Jackson was discovered unresponsive to when he was transferred to the hospital was documented. The memorandum was added to the case file.

A shift activity report, written by Deputy M. Bitle, is also included in the case file. The report indicated Jackson refused to take her medication during the morning pill call and was later found unresponsive during the afternoon pill call. The nurse who was present for pill call, assessed Jackson, and then determined Paramedics were summoned to the scene and Jackson was transported to Valley Care Medical Center Emergency Room. (RL1702)

Property and Evidence:

Coroner's receipt #37001 was issued for Jackson's body and the specimens obtained from the hospital. Jackson's property from Santa Rita Jail was released to her family at the hospital. (RL1702)

Coroners Fees:

Body removal and body preparation fees of \$321.00 apply in this case. While making the body removal at the hospital, I met with Jackson's family and advised them to contact a mortuary as soon as possible to avoid additional fees. They said they understood.

As of November 5, 2015, an outstanding balance of \$321.00 applies to this case. A billing form was submitted and a fee hold was placed on this case to reflect the outstanding balance. (RL1702)

Investigative Details:

On October 2, 2015, about 1200 hours, Deputy Plasencia and I (Lorenzana) arrived at Alta Bates Medical Center-Ashby to make the removal of Jackson. We arrived to the ICU, and met with Registered Nurse Dhea Montegrande who led us to Jackson who was in room #10. I examined Jackson's body while Deputy Plasencia took photos to



document her condition. There were no obvious signs of trauma. I obtained medical records and specimens from the nurse and issued receipt # 37001 for Jackson and the specimens.

While there, I met with Jackson's family and explained the coroner's involvement including the need to contact a mortuary as soon as possible. The family said they understood.

About 1300 hours, we arrived to the Coroner's Bureau and processed Jackson into the morgue, which included intake photos. The specimens were attached to Jackson's foot and she was placed in the morgue. (RL1702)

On September 30, 2015, about 1900 hours, Jackson was found unresponsive in her cell during pill call. Pill call, is when a nurse is escorted by the housing unit deputy, from inmate to inmate, and prescribed medications are distributed to the inmates. It was reported by Deputy R. Tuttle that Jackson refused to take her medication during morning pill call.

Jackson was later found unresponsive in her cell and assessed by the nurse. The Nurse felt Jackson needed a higher level of medical care and she was transported by ambulance to Valley Care Medical Center for treatment. Due to the nature of Jackson's illness, she was then transferred to Alta Bates Medical Center for a higher level of care as Valley Medical Care could not provide adequate the necessary neurological treatment. She became comatose and was placed on a ventilator until she went into cardiac arrest and was pronounced deceased on October 2, 2015, at 1015 hours. (RL1702)

On October 2, 2015, about 1048 hours, I notified Sergeant Baron of Jackson's death. At 1050 hours, I notified Sergeant Gemmell at the Eden Township Substation (ETS) Investigations Unit of Jackson's death. Sergeant Gemmell stated ETS would not be investigating this case unless the autopsy determined there was foul play involved. (RL1702)

On October 5, 2015, Coroner's Chief Pathologist Dr M. Ferenc conducted an autopsy on Jackson and deferred the cause of death pending the results of histology and toxicology tests.

On October 7, 2015, Central Valley Toxicology, Inc. performed a complete drug screen on the specimen obtained from Alta Bates Medical Center. The screen revealed there was Gabapentin and Quetiapine detected. There were no other common acidic, neutral or basic drugs detected. There was no ethyl alcohol detected.

On October 28, 2015, a histological exam was performed and revealed slight cardiac hypertrophy, pulmonary edema, enlarged liver and spleen, lymphadenopathy, encephalomalacia consistent with anoxia, and early pneumonia.

On October 28, 2015, Coroner's Chief Pathologist Dr M. Ferenc gave Jackson a cause of death as "Complications of Chronic Seizure Disorder." (RL1702)

Findings:

On November 5, 2015, I reviewed this case to determine a manner of death and to prepare this case for closure. Upon review of the case file, I determined the manner of death to be natural. Jackson lived alone in her cell and there was no evidence to suggest her demise was anything but natural. The cause of death as given by Chief Pathologist, Dr. M. Ferenc, was complications of chronic seizure disorder. Dr.



Ferenc noted Jackson had a history of several current and past chronic infectious disease processes that could have lowered the threshold for her epilepsy. However, the clinical, anatomic, and histological evidence to support that was nebulous. (RL1702)

Supervisor Review:

On Thursday, November 05, 2015, I (Sgt. Baron) reviewed this case and found it to be complete. I concur with the findings and approve this case for closure. However, due to the fact the Coroner's fees are still outstanding, the case will be closed-pending fees and will not be disseminated until all fees are paid in full. (HB#2017)

Alameda County Sheriff's Office

Coroner's Bureau 2901 Peralta Oaks Court, 2nd Floor, Oakland, CA 94605-5319



Director of Emergency Services Coroner - Marshal

MEMORANDUM

DATE:

October 5, 2015

FROM:

Michael Joseph Ferenc, M.D.

TO:

Case File 2015-02967

SUBJECT:

AUTOPSY PROTOCOL

An autopsy was performed upon the body of Marquis Nathaniel Jackson at the Coroner's Bureau, 2901 Peralta Oaks Court, Oakland, California, on October 5, 2015, at about 9:20 a.m.

FINDINGS

- 1) CARDIAC HYPERTROPHY, SLIGHT.
- 2) PULMONARY EDEMA.
- 3) ENLARGED LIVER AND SPLEEN.
- 4) LYMPHADENOPATHY.
- 5) ENCEPHALOMALACIA CONSISTENT WITH ANOXIA.
- 6) EARLY PNEUMONIA
- 7) PLEASE SEE SEPARATE TOXICOLOGY REPORT (CVT-15-11559).

CAUSE OF DEATH: COMPLICATIONS OF CHRONIC SEIZURE DISORDER.

NOTE: The decedent had a history of several and current and past chronic infectious disease processes that could lower the threshold for his epilepsy. However, the clinical, anatomic, and histological evidence to support that is, in my opinion, nebulous.

cc: EMS

District Attorney
Investigations Bureau



1 CIRCUMSTANCE OF DEATH

- 2 This 33 year-old inmate expired in hospital about 3 days
- 3 after an apparent seizure in a Santa Rita jail cell on
- 4 09/30/2015. When found, the inmate was covered in vomit.
- 5 The inmate was a transgender individual who apparently was
- 6 in the process of gender re-assignment and still had anatomic
- 7 male genitalia. The decedent's medical history included mood
- 8 disorders, HIV infection, syphilis infection, hepatitis B
- 9 infection, positive PPD, asthma, past methamphetamine abuse, and
- 10 chronic seizures. Per prison medical records (Tri City health
- 11 Center LEJA04271982; visit date 01/25/2011)) the decedent had
- 12 had grand mal seizures since childhood with a past frequency as
- 13 high as about two seizures per week.
- 14 Initially at hospital, the decedent appeared post-ictal
- 15 but later became unresponsive and was transferred to a hospital
- 16 (Alta Bates Summit Medical Center 60801342) with a higher
- 17 neurological care capacity. Radiology studies showed mild
- 18 enlargement of the lateral ventricles, but no other focal
- 19 findings, including no trauma. No specific etiology for the
- 20 decedent's final seizure was determined clinically. Despite
- 21 supportive care, the decedent expired on 10/02/2015. An
- 22 admission urine drug screen was negative.

Sheriff-Coroner Alameda County

Body of MARQUIS NATHANIEL JACKSON

23	PRELIMINARY EXAMINATION				
24	The unembalmed body of a middle-aged man is on a mortuary				
25	gurney, is undressed, and has a properly labeled identification				
26	tag.				
27	RECENT INJURIES				
28	No significant recent antemortem injuries are identified.				
29	EXTERNAL EXAMINATION				
30	The body of a well-developed, thin, middle-aged, black man				
31	is 74 inches, 190 pounds, and consistent with the stated age of				
32	33 years. Rigor mortis is moderate. Livor mortis is moderate,				
33	posterior, red blue, and fixed.				
34	Multiple tattoos are on the limbs and front of the torso.				
35	The head shows no significant trauma or scars. The hair is				
36	black with rare grey, curly, and over 8 inches. The eyelids,				
37	sclera, and conjunctivae are unremarkable. The eyes are brown.				
38	The pupils are roughly round and equal. The nose and mouth show				
39	no lesions. A nasogastric tube is seen. The teeth are in fair				
40	condition. An airway tube is present. The ears are intact.				
41	The neck shows no significant trauma or scars. The chest				
42	shows no significant trauma or scars. The breasts show early				
43	female development (Decedent was reported to have been in				
44	transgender therapy.). The abdomen shows no significant trauma				

Sheriff-Coroner Alameda County

Body of MARQUIS NATHANIEL JACKSON

- 45 or scars. ECG pads are on the torso. The genitalia are of an
- 46 uncircumcised man. A Foley catheter is connected to a
- 47 collection device with clear yellow urine.
- The arms and forearms show no significant trauma or scars.
- 49 Vascular lines are in the forearms. The hands, fingers, and
- 50 fingernails are intact. The legs and feet show no significant
- 51 trauma or scars. An ECG is on the left shin. Chipped pink nail
- 52 polish is on the toenails.
- 53 The back shows no significant trauma or scars. The anus is
- 54 unremarkable.

55 <u>INTERNAL EXAMINATION</u>

- BODY WALLS AND CAVITIES: The subumbilical fat pad is ½
- 57 inch. The subcutaneous and breast tissues show no trauma. The
- 58 pleural cavities are smooth and glistening, have no significant
- 59 adhesions, and contain minimal serous liquid. The pericardial
- 60 sac is smooth and glistening, and contains over 50 mL of yellow
- 61 translucent thin liquid. The mediastinum is unremarkable. The
- 62 diaphragm is intact. The peritoneal cavity shows no significant
- 63 adhesions and contains minimal serous liquid. The major organs
- 64 are normally positioned.
- 65 CARDIOVASCULAR SYSTEM: The epicardium is smooth and
- 66 glistening. The coronary arteries follow a right predominant

- 67 distribution and show no significant atherosclerosis. The heart
- 68 is 410 grams. The myocardium is red-brown, normal texture, and
- 69 uniform. The right ventricular free wall does not show any
- 70 significant increased fatty tissue or increased fibrous tissue.
- 71 The left and right ventricles are 1.6 and 0.2 cm. The chambers
- 72 are not dilated. The endocardium, chordate, and papillary
- 73 muscles are intact. The coronary sinus ostium is obscured by a
- 74 thin translucent valve. The foramen ovale is closed. The
- 75 atrioventricular and semilunar valves are normally formed, show
- 76 no lesions or vegetations, and are appropriate for age. The
- 77 aorta shows no atherosclerosis. The venae cavae and great
- 78 vessels show no thrombi or emboli.
- 79 PULMONARY SYSTEM: The right and left lungs are 1010 and
- 80 640 grams. The lungs are red, partially aerated, soft,
- 81 moderately edematous, and uniform with smooth glistening
- 82 surfaces. The bronchi show no significant lesions. The mucosa
- 83 is tan. The vessels show no significant thrombi or emboli.
- 84 HEPATOBILIARY SYSTEM: The liver is normal texture, uniform
- 85 with a smooth glistening capsule, red brown, and 2500 grams.
- 86 The biliary tract is intact, and the gallbladder contains 30 mL
- 87 of thin, dark green, opaque bile. The pancreas is tan,
- 88 lobulated, normal texture, without focal lesions, and tan.

Sheriff-Coroner Alameda County

Body of MARQUIS NATHANIEL JACKSON

- 89 HEMATOPOIETIC SYSTEM: The spleen is normal texture,
- 90 uniform with a smooth capsule, dark red, and 280 grams. The
- 91 thymus gland is unremarkable for age. The lymph nodes are
- 92 slightly enlarged, tan, and soft. The bone marrow of the ribs
- 93 and calvarium is unremarkable for age.
- 94 GASTROINTESTINAL SYSTEM: The oropharynx, esophagus, and
- 95 stomach show no lesions. The stomach contains over 200 mL of
- 96 green, opaque, liquid. The duodenum, jejunum, ileum, and large
- 97 bowel show no mucosal, mural, or serosal lesions. The mesentery
- 98 is intact. The appendix is present.
- GENITOURINARY SYSTEM: The adrenal glands are unremarkable.
- 100 The renal capsule strips with minimal difficulty. The right and
- 101 left kidneys are 180 and 150 grams. The cortices are normal
- 102 thickness, normal texture, uniform, and red tan. The calyces
- 103 and collecting systems are not dilated and show no lesions. The
- 104 pyramids and papillae are intact. The ureters are patent to the
- 105 empty bladder. The bladder mucosa and wall are unremarkable.
- 106 The prostate gland is unremarkable for age. The testes are
- 107 unremarkable for age.
- 108 MUSCULOSKELETAL: The muscles show no significant focal or
- 109 diffuse lesions. The skeleton is well developed and appropriate
- **110** for age.

111 HEAD AND CENTRAL NERVOUS SYSTEM: The scalp shows no significant hemorrhages. The skull shows no fractures. The 112 dura mater and leptomeninges show no significant hemorrhages or 113 The floor of the skull and dural sinuses are intact. 114 The circle of Willis shows no aneurysms and no significant 115 1400 grams. The cerebral brain is 116 atherosclerosis. The hemispheres, cerebellum, and brain stem are soft and swollen 117 with moderate flattening of the gyri and narrowing of the sulci. 118 The grey and white matter, deep nuclei, cerebellar folia, and 119 brain stem shows marked softening with loss of distinction 120 between grey and white matter as well as compression of the 121 lateral ventricles. The pituitary gland is intact. 122 ANTERIOR NECK ORGANS: The anterior neck muscles show no 123 The thyroid gland is symmetrical, not enlarged, 124 hemorrhage. The parathyroid glands are not 125 normal texture, and red brown. identified. The laryngeal cartilages, cricoids cartilage, and 126 hyoid bone are intact. The tracheal, laryngeal and epiglottic 127 mucosa shows no lesions. The mucosa is tan. The tongue is 128 unremarkable. The posterior pharynx is not obstructed. 129 The cervical vertebrae prevertebral fascia is intact. 130 131 intact.

Sheriff-Coroner Alameda County

Body of MARQUIS NATHANIEL JACKSON

133	SPECIMENS RETAINED: Peripheral blood, heart blood, liver,
134	urine, and vitreous humor saved. Hospital antemortem samples
135	also retained. A full toxicology screen is requested.
136	Representative sections of tissues are saved and selected
137	sections are submitted for processing.
138	
139	
140	Michael Joseph Ferenc, M.D.
141 142	

Alameda County Sheriff's Office

Coroner's Bureau 2901 Peralta Oaks Court, 2nd Floor, Oakland, CA 94605-5319



Gregory J. Ahern, Sheriff

Director of Emergency Services Coroner - Marshal

CASE NUMBER:	CASE NAME:
2015-02967	Marquis Nathaniel Jackson
PATHOLOGIST: Michael Joseph Ferenc	HISTOLOGICAL EXAMINATION

BRAIN: A section of cortex shows no neoplasia, degenerative diseases, or trauma. A diffuse slight increase in microglial cells is seen.

HEART: Sections of left and right ventricle show intact myocytes and no significant inflammatory infiltrates. Endocardial and epicardial surfaces and vessels are unremarkable.

LUNGS: Sections show intact congested parenchyma with areas with pink amorphous intra-alveolar liquid. In several areas sheets of polymorphonuclear leukocytes fill alveoli. Bronchial elements are unremarkable. No significant polarizable foreign material is seen.

LIVER: Section shows unremarkable hepatocytes, sinusoids, and portal areas.

KIDNEY: Section shows intact glomeruli, tubules, interstitium, and vessels. No significant polarizable foreign material is seen.

ADRENAL GLAND: Section shows unremarkable cortex and medulla.

SPLEEN: Section shows intact red pulp, white pulp, and vessels.

PANCREAS: Section shows unremarkable islets and acini, vessels, and ducts.

Date Signature M.D.



Case Name:

TOXICOLOGY NUMBER:

CVT-15-11559

Jackson,

Marques

Hospital samples: 10.5 ml blood (4 vials) & 40 ml urine (2 vials) each labeled

Specimen Description:

"Jackson, Marques; 60801342; 33Y; M; 10/01/15; AL; (blds) 0340 hrs; (ur) 0345 hrs"

Delivered by Tricor

07-Oct-15 Date

Bill Posey Received by

Date 07-Oct-15

Request:

Complete Drug Screen

Agency Case # 2015-02967

Requesting Agency

Alameda Co. Coroner's Office Attn: Acct's Payable 480 4th Street Oakland CA 94607

Report To

Alameda Co. Coroner's Office Attn: Dr. Ferenc

2901 Peralta Oaks Ct., 2nd Floor

Oakland CA 94605

RESULTS

Specimen: Hospital Blood (Lavender Top Vial-10/01/15, 0340 hrs) Sample

Complete Drug Screen: Gabapentin and Quetiapine detected.

No other common acidic, neutral or basic drugs detected.

No Ethyl Alcohol detected.

Gabapentin = 1.2 mg/L

Quetiapine = 0.52 mg/L

Blood Gabapentin Ranges

Effective Level:

(6-21 mg/L)

Potentially Toxic:

Not Known

Blood Quetiapine Ranges

Effective Level: (0.025 - 0.365 mg/L)

Potentially Toxic: (1.8 mg/L) case report

B.L. POSEY S.N. KIMBLE Directors

October 19, 2015

1580 Tollhouse Road Clovis, California 93611 Phone (559) 323-9940 Fax (559) 323-7502